

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|--------------------|--------|----------|
| FEE DETERMINATION | <i>[Signature]</i> | | 10/10/00 |
| O.I.P.E. CLASSIFIER | | | 11-17-00 |
| FORMALITY REVIEW | <i>[Signature]</i> | 827 | 11-02-00 |
| RESPONSE FORMALITY REVIEW | <i>[Signature]</i> | 967 | 4-6-01 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
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| Final Original | |
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If more than 150 claims or 10 actions
staple additional sheet here

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